## Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

17783 USA

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE OF			OTHER THAN SMALL ENTITY	
TOTAL CLAIMS			IH					RATE	FEE	) 	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		ВА	SIC FEE	355,00	OR	BASIC FEE	·710.00
TOTAL CHARGEABLE CLAIMS			\		· •			<b>(\$ 9=</b>		OR	X\$18=	
INDEPENDENT CLAIMS			7 minus 3 =		· p			X40=		OR	X80=	·
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT				$\vdash$	·135=			+270=	
* If 1	the difference	in column 1 is	less than ze	ess than zero, enter "0" in			L	OTAL		OR OR	TOTAL	710
CLAIMS AS AMENDED - PART II								OIAL	<u>.</u>	JOH.	OTHER	10000A-17
	(Column 1)				(Column 2) (Column 3			SMALL ENTITY			SMALL ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	IEST IBER OUSLY FOR	PREȘENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 14	Minus	** o	20	=	>	<b>(\$ 9=</b>		OR	X\$18=	
	Independent	. 3	Minus	و	?	=	3	K40=		OR	X80=	
	FIRST PRESE	NTATION OF MI	JUTIPLE DEF	TIPLE DEPENDENT			+	135=		OR	+270=	
	(Column 1) (Colum						<u> </u>	TOTAL			TOTAL	•
					mn 2)	(Column 3)		DIT. FEE			ADDIT. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT	i	NUN PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Z D M	Total	*	Minus	**		=		<b>(\$ 9=</b>		OR	X\$18=	
ME	Independent	•	Minus '	***		=		X40=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							135=		OR	+270=	
								TOTAL		OP.	TOTAL	
			OIT. FEE		JO.1	ADDIT. FEE						
AMENDMENT C		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		HIGI NUM PREV	mn 2) HEST MBER OUSLY OFOR	PRESENT EXTRA	$\Gamma$	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	] [ }	<b>(\$ 9=</b>		OR	X\$18=	
	Independent	*	Minus	***	- A	=		X40=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +135=										+270=	
	If the entry in colu	ımn 1 is less than t	the entry in colu	ımn 2, wri	te "0" in co	olumn 3.	<u> </u>	TOTAL		OR	TOTAL	
**1	If the "Highest Nu	imber Previously F imber Previously F nber Previously Pa	Paid For" IN TH	IS SPACE	is less th	an 3, enter "3."	,,,,,,	OIT. FEE	propriate bo	OR x in co	ADDIT. FEE lumn 1.	